

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>H. H. H.</i>		<i>10-11-01</i>
O.I.P.E. CLASSIFIER		<i>W. H. W.</i>	<i>10/19/01</i>
FORMALITY REVIEW	<i>M. K.</i>	<i>1102</i>	<i>11/01/01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
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Original	
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Claim	Date
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Original	
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If more than 150 claims or 10 actions
staple additional sheet here

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